CAMP	AIGN CONTRIBU	TIONS AND EXPENSE	S REPORT		s	tate of Nevada
M	IKE McGI		evada Se	NATE	Cent	ral NEVADO
ame (p	' .	Office	(if applicable)	Caux-	Di	strict (if applicable)
	Address (include city and	rin code)		01400	Telephone No.	5-2001
	Address	R CANDIDATE □ PAC	□BAG □PO	LPRTY □INDE	XP []NONPROFIT	CORP
elect A	Appropriate Box(es)	EL CHIDIDATE LIFAC				
		☐ AMENDED ☐ ANNUA		ITIONERS WHO INI EXPEND FUNDS IN	TIATE/CIRCULATE PE	ETITION & RECEIVE
		Due January 15, 2006				WEEKS .
	Period: January 1, 2	005 - December 31, 2005				
]		e August 8, 2006* 006 Aug 3, 2006			H. n.	- 0
_		-			1 100	7 2006 1 K
١		– October 31, 2006* 1006 – Oct. 26, 2006			JAN "	there !
7	•				Lesh	HELPSTATE
j		- January 15, 2007*/** 2006 - Dec. 31, 2006			SECRETA	RYOF
7	,	·				FICE USE ONLY
		Due January 15, 2007 1, 2006 – December 31, 2	006			
	Those Penerts are:	filed by incumbents/cand	lidatae running	for office in the	2006 election cv	cle
**	Third Report suffic	es for 2007 Annual Filing	if candidate al	so filed Report	Nos. 1 and 2	
	CONTR	IBUTIONS SUMMARY				Cumulative From Beginning of
	CONTR	IBUTIONS SUMMANT			This Period	Report Period #1 through End of
						This Reporting Period
		outions Received in Excess of \$1	100		1600.00	1600.00
:		outions Received of \$100 or Less	S		<u> </u>	
	(See page 2 of instr	·	rantood by a third			
•	party. (See page 2 of	butions in the form of loans gua instruction sheet)	raineed by a unio			
•	 Total Monetary Contril (See page 2 of instru 	butions in the form of loans that action sheet)	were forgiven		Ø	
			This Period	Cumulative From Beginning of		
			*********	Report Period #1 Through End of		
				This Reporting Period		
:	5. Total Amount of Mo	netary Contributions			11.60	
	Received (Add Lines 1 through	4) (See page 2 of instruction sheet)			1600.00	
(6. Total Amount of Writte	en Commitments for ommitment is funded, report as				
	contribution (monetary or in (See page 2 of instruction	n kind))	ϕ			
		f Contributions Received in				
	Excess cf \$100	(See page 2 of instruction sheet)	<u> </u>	_L	_	
		. · · · •	EXPENSES SUI	ÍMARY		
	8. Total Monetary Expe	nses Paid in Excess of \$100			12 721 00	1
	(See page 2 of instr	uction sheet)			12,731.95	
	9. Total Monetary Exper (See page 2 of instri	nses Paid of \$100 or Less action sheet)			611.58	<u> </u>
	10. Total Amount of Al	l Monetary Expenses Paid	h41		13.34353	
	(Add Lines 8 and 9) 11. Total Value of In Kin	(See page 2 of instruction s d Expenses in Excess	, ж	1	1. 5.15	1
	of \$100 (See page	3 of instruction sheet)	<u>-4</u>	1	_	
	Disposition of Unspet (Only reported on Reported)	ort #3, Annual Report or 15th	,			
	day of the second mon	th after candidates defeat or				
	incumbent does not rul (See page 3 of instruction	•	119,663	3.47		
			AFFIRMATI	ON		
1	Declare Under Pen	alty of Perjury That the F				
\prec						
<u> </u>	1 OCK V	c/m			Date	
Signatu	ire	\			Date	Ģ

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Revised: Sep-05

PAGE OF

MIKE	McGinness
Name (print)	

DENATE

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
US Ecolary PO BOX 5:713 Beally, NV 139003	10/20/05	\$600			
PEPPERMIL! CASINGS 90 WAST GREVEL #600 RENDINVERSOR	10/20/05	41000			
			E 1077		
			1		

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PAGE Z OF 8

MIKE McGinness Name (print)

Office (if applicable)

Contral NU District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
FALLON, NY E9406	J	1/22/05	9 250°
MIKE MCGIMNESS 770 WILDES RP FALLOW, NV E9406	С	1/26/05 3/13/05 6/30/05	1250 12066 11138
		7/23/05 10/1/05 10/20/05	41026 41215-
HOBY NEUNDA, INC 2128 Chertsay DR *B LAS VEGAS, NV 89108	١	2/19/05	4175°
Churchill Ants Council PO BOX 2204 FALLENIN 89407	J	3/5/05 5/1/05	+ 500
AMERICAN LEGION GIRLS STATE 1718 STATZ ST N. LAS VEGAS, NV 89030		4/10/05	* 250°
FALLON: NV 89406	٦	4/29/05	*750°
YERINGTON H. School Rodes PO BON 471 89447	J	5/1/05	^{\$} 250
Jeths (Copy Express 235 So Mains St Fallow, NV 89406	Δ	66605 814605	* 290.02 • 61.43
FALLEN, NV 89406	J	7/21/05	[₹] 250°
GREEN WAVE QUANTER BOUR (W) PO BUY 161 FALLUN 89407	J	9/12/05	\$200°
CEDA Business Council 446 L. WILLIAMS FALLON, NV EAHOB	J	9/12/05	4200

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PAGE 3 OF 8

MIKE Mc Ginness

Neunda senute

District (if applicable)

Name (print)

Office (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
NEVADO WATERTOW ASSIN		11/12/05	*100
RENO, NO 89513		10/20/05	#°400
EVETON WAS BUTTOF	A	10/15/15	\$1255E
NEWMO SIDER HANRED LES 400 S. CARSON ST. CARSON CATHINN 89701	J	11/17/05	⁴ 300
LYON a. Republian WO 16 No. Min YERITIGTON, NU 89447	1 1	12/5/65	*165 ^w

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PAGE 4 OF 8

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M	IKE	1/1/c(1 O11111655

Neumon Senate

Contral NV

Name (print)

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
\$		

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IN KIND CAMP CONTRIBUTIO			Report Period #	#AF
MIKE MO	Ginness	NEUMOS Senate	Control New	IANY
Name (print)		Office (if applicable)	District (if applic	cable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
Ø						
····						
				·		

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PAGE 6 OF 8

IN KIND WRITTEN COMMITMENTS		Report Period #AF
Mike Mc Ginness	Neuma Senate	Contral Nevnon
Name (print)	Office (if applicable)	District (if applicable)

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
Q		

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IN KIND CAMPAIGN EXPENSES	•	Report Period	#AF
MILE Mc Ginness	Nevam Sonate	Contral NEW	MM
Name (print)	Office (if applicable)	District (if app	licable)

IN KIND

Expenses in Excess of \$100 Transfer Yotal Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
Q			

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Prescribed by Secretary of Stata NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

PAGE OF